

**ANNUAL REPORT FOR 2012**  
**FAMILY LEAVE INSURANCE AND**  
**TEMPORARY DISABILITY INSURANCE PROGRAMS**

New Jersey Department of Labor and  
Workforce Development  
Office of Research and Information  
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## **FAMILY LEAVE INSURANCE AND TEMPORARY DISABILITY INSURANCE PROGRAMS**

The enactment of P.L. 2008, chapter 17 on May 2, 2008 created the New Jersey Family Leave Insurance Program and required the Commissioner of the Department of Labor and Workforce Development to issue annual reports, containing information on both the Family Leave Insurance (FLI) and Temporary Disability Insurance (TDI) programs. This report provides a summary of data on claims during calendar year 2012 for the State Plan for FLI and the State Plan for TDI, along with comparative information from 2011.

The report provides information on claims, claimant characteristics, benefits, revenues and administrative expenses during 2012 for the State Plan for FLI, which can be found in Tables 1 through 5. The report also provides similar information for 2012 for the State Plan for TDI, which can be found in Tables 6 through 9.

### **Highlights**

The report contains the following key highlights:

- During 2012, the third full calendar year of New Jersey's FLI program, there were 30,892 eligible claims, compared with 30,701 in 2011.
- Over 81 percent of eligible FLI claims were filed to bond with a newborn or newly adopted child, with the remainder of claims to care for a seriously ill family member.
- Gross benefit payments totaled \$77.5 million for FLI, with an average weekly benefit amount for all claims of \$487.
- The average duration for FLI cases completed in 2012 was 5.2 weeks, up slightly from 5.1 weeks in 2011. The average amount of benefits paid for FLI cases completed in 2012 was \$2,504, an increase of about two percent compared with 2011 (\$2,465).
- The largest single group of FLI claimants was females under age 45, which includes most women of childbearing age. This category accounted for over 77 percent of FLI eligible claimants in 2012.
- Nearly all FLI eligible bonding claimants were under age 45 (99.0%), while the majority of FLI eligible family care claimants were over the age of 45 (59.7%).
- TDI claims for benefits due to pregnancy and complications of childbirth were the largest TDI claims category in 2012, comprising about 24 percent of eligible claims.
- The largest single group of TDI claimants, again, was females under age 45. This category accounted for over 40 percent of eligible and ineligible claimants in 2012.

However, the overall percentage of claimants under age 45 has been steadily declining over the past 23 years as older workers comprise a larger proportion of the labor force.

- The average duration for TDI cases completed in 2012 was 10.0 weeks, while the average amount of benefits paid for completed cases was \$4,273.

### **Background**

With the enactment of P.L. 2008, chapter 17, on May 2, 2008, New Jersey extended the temporary disability benefits program to provide FLI benefits, a monetary benefit (not a leave entitlement), for covered individuals bonding with newborn or newly adopted children or caring for seriously ill family members. Beginning July 1, 2009, claimants are eligible for up to six weeks of FLI benefits per 12-month period. Workers may receive weekly FLI benefits equal to two-thirds of their average weekly wage, up to a maximum weekly benefit amount of \$546 in 2009; \$561 in 2010; \$559 in 2011, and \$572 in 2012.

In order to be eligible for FLI benefits, one who is taking bonding leave must take that leave for a period of more than seven consecutive days, unless the employer permits the leave to be taken in non-consecutive periods, in which case, each leave period must be at least seven days. In the case of claims to care for a seriously ill family member, in order to be eligible for FLI benefits, one who is taking such leave must do so for six consecutive weeks, or for intermittent weeks or for up to 42 intermittent days per 12-month period. A family member is defined as the claimant's child, spouse, domestic partner, civil union partner or parent.

The FLI program is funded entirely through worker contributions, which were equal to 0.08 percent of taxable wages in calendar year 2012. Worker contributions to the FLI account in the disability benefits fund began on January 1, 2009 at a rate of 0.09 percent of taxable wages. The worker contribution rate is adjusted annually to a rate sufficient to maintain an account balance needed to pay benefits. During calendar years 2011 and 2010, the contribution rate was equal to 0.06 and 0.12 percent of taxable wages, respectively.

All New Jersey employers covered by the Unemployment Compensation Law are also subject to the FLI provisions of the Temporary Disability Benefits Law, including certain government entities which are not automatically covered by TDI. A subject employer is automatically covered under the State Plan for FLI unless it has covered its workers under an approved private plan for FLI. Estimated State Plan covered employment for FLI insurance averaged 3,668,100 in 2011 and 3,708,700 in 2012.

Since its enactment in 1948, the New Jersey Temporary Disability Benefits Law has provided benefits to workers affected by non-work related injuries or illnesses. All employers, except local government employers, for which coverage is optional, are subject to the provisions of this law when their quarterly payrolls are at least \$1,000. Employers may choose between the State's insurance plan or obtain private coverage

equal to or better than the State Plan. The State TDI Plan is funded through a combination of worker and employer contributions. Estimated State Plan covered employment for temporary disability insurance averaged 2,711,500 in 2011 and 2,738,600 in 2012.

## **FAMILY LEAVE INSURANCE**

### **Summary of FLI Claims and Benefits**

During 2012 there were 30,892 eligible FLI claims, up slightly from 2011 when 30,701 eligible claims were filed (see Tables 1 and 1A). Of the 2012 total, over 81 percent were bonding claims (25,079), with the remaining claims for care of a seriously ill family member (5,813). Claims for benefits for bonding with a newborn child were again the largest single category of claims in 2012 out of the five claimant groups, comprising 80.7 percent of all eligible claims. The next largest category was for care of a family member other than a child or spouse (which includes parents); this category comprised 8.4 percent of total eligible claims.

Gross benefit payments rose to \$77.5 million in 2012, an increase of 4.0 percent from 2011 when benefits totaled \$74.5 million. During 2012, \$66.7 million, or 86.1 percent, of benefit payments were for bonding claims. The average weekly benefit amount for all claims was \$487, ranging from a low of \$447 for care of an ill child to a high of \$549 for bonding with a newly adopted child. The average total benefit per eligible claim was \$2,508. Benefit measures, such as the average weekly benefit amount and gross benefit payments, are influenced by the maximum weekly benefit rate which was \$572 in 2012.

Estimated average duration for all FLI eligible new claims was 5.2 weeks in 2012. The estimated duration and estimated average benefit data differ from the data for completed cases presented in Table 3 (see Table 1, footnote 6).

### **FLI Claimant Characteristics**

Table 2 contains data on the age and sex of all FLI claimants in 2012, with Tables 2A and 2B providing age and sex data for bonding claimants and family care claimants, respectively. Claimant characteristics data for 2012 were generally similar to those for 2011. Females represented 86.0 percent of all eligible claimants for whom information was available and 78.1 percent of ineligible claimants (see Table 2). Females under age 45, which includes most women of childbearing age, were the largest single group of FLI claimants in 2012, accounting for 77.7 percent of eligible and 59.8 percent of ineligible claimants. Claimants under 45 years of age accounted for 88.7 percent of total eligible claimants in 2012. Claimants between the ages of 25 and 34 were the largest subcategory, comprising 56.0 percent of all eligible claimants.

For FLI claimants taking leave to bond with a newborn or newly adopted child, females comprised 88.4 percent of eligible claimants, while males comprised 11.6 percent (see

Table 2A). Nearly all eligible bonding claimants were under age 45 (99.0%), with 65.0 percent between the ages of 25 and 34 and 28.5 percent in the age range of 35 to 44.

The majority of FLI eligible claimants taking leave to care for a seriously ill family member were female (75.0%). Males comprised 25.0 percent of family care claimants, compared with 11.6 percent of bonding claimants (see Table 2B). In contrast to bonding claimants, 59.7 percent of family care claimants were over the age of 45. Nearly one-third of all family care claimants were in the age range of 45 to 54 (31.3%).

### **FLI Completed Cases by Type of Claim**

Table 3 contains a summary of average claim duration and average benefit payment data by type of claim for cases which were completed in 2011 and 2012. Completed cases include those claims formally closed in the FLI database, as well as those with no payment activity for 90 days.

Of the 30,990 total completed FLI cases during 2012, 81.0 percent were for bonding with a newborn or newly adopted child (25,100) and 19.0 percent were for care of a seriously ill family member (5,890). Approximately 42 percent of total eligible claims for FLI were bonding claims that immediately followed a TDI claim for pregnancy and childbirth (12,887).

The average duration of a FLI claim to bond with a newborn or newly adopted child was 5.4 weeks, with FLI bonding claims immediately following TDI pregnancy and childbirth claims recording slightly longer average durations (5.5 weeks) when compared with bonding claims that did not immediately follow TDI claims (5.2 weeks). Completed cases for care of a seriously ill family member had an average duration of 4.2 weeks, while the average duration for all completed cases was 5.2 weeks.

The average gross benefits paid per completed case was \$2,504, with the average benefit payment for bonding claims (\$2,653) about 42 percent higher than the average for family care claims (\$1,867). The average benefit payment was about five percent lower for bonding claims immediately following a TDI claim (\$2,587) than for bonding claims not following a TDI claim (\$2,724).

### **FLI Employer Required Leave Resulting in Reduced Benefit Duration**

Employers have the option of requiring their employees to use up to two weeks of any employer paid leave prior to receiving FLI benefits, with the duration of the employee's FLI claim reduced by the amount of employer paid leave taken. Table 4 contains a summary of claims which had reduced benefit duration because of employer required sick leave, vacation or other fully paid leave.

During 2012, there were 5,499 claims, or 17.8 percent of all eligible FLI claims, which had reduced benefit duration due to the use of some type of employer-required fully paid

leave. For these claims, benefits were reduced by an average of 10 days, the same as in 2009, 2010 and 2011.

### **FLI Revenues, Benefits and Administrative Expenses**

Table 5 contains a summary of State Plan revenues, benefits and administrative expenses during 2011 and 2012. The State Plan for FLI is financed entirely through worker contributions, which totaled \$73.0 million in 2012 and \$56.7 million in 2011. The increase in worker contributions was due to an increase in the contribution rate from 0.06 percent of taxable wages in 2011 to 0.08 percent in 2012. The worker contribution rate is adjusted annually based on the balance in the fund and expected benefits and expenses for the upcoming year. The FLI account had \$0.2 million in other income during 2012, including interest income.

Total FLI State Plan benefits during 2012 were \$76.8 million, an increase of 2.8 percent from 2011 when benefits were \$74.7 million. Benefit payments for family leave during unemployment were \$0.6 million in 2012, up slightly from the level in 2011 of \$0.5 million. FLI administrative expenses declined to \$6.2 million from \$6.5 million during the previous year.

## **TEMPORARY DISABILITY INSURANCE**

### **Summary of TDI Claims and Benefits**

Claims for TDI benefits are broken down into 17 major claim categories based on the claimant's type of illness or injury. Table 6 shows the number of eligible claims for disabilities due to pregnancy and complications of childbirth compared with disabilities for all other types of claims. Claims for benefits due to pregnancy and complications of childbirth were the largest single claims category in 2011 and 2012 out of the 17 major claim categories, comprising 23.4 and 23.6 percent of all eligible claims, respectively. During 2012, there were 23,453 eligible claims for TDI benefits due to pregnancy and complications of childbirth compared with 76,007 eligible claims for the other 16 claim categories out a total of 99,460 eligible claims.

### **TDI Claimant Characteristics**

Table 7 contains a summary of data by age and sex for eligible and ineligible TDI claimants in 2012. Females under age 45, which includes most women of childbearing age, were the largest single group of claimants in 2012, as in each of the past 23 years. This group accounted for 40.9 percent of eligible and 41.4 percent of ineligible claimants. Females represented 70.5 percent of all eligible claimants for whom information was available. Among ineligible claimants, 66.3 percent were female.

The percentage of all eligible claimants under 45 years of age continued to edge down, falling to 51.5 percent in 2012 from 51.8 percent in 2011, reflecting a gradual increase in the proportion of older workers in the labor force.

### **TDI Completed Cases by Type of Claim**

Table 8 contains a summary of average claim duration and average benefit payment data for TDI cases which were completed in 2011 and 2012. Completed cases include those claims formally closed in the TDI database, as well as those with no payment activity for 90 days. As with eligible claims, pregnancy and complications of childbirth were again the largest single category of TDI completed cases in 2012, with 24,011 cases comprising 23.8 percent of total completed cases (100,888). For all other claim categories combined, there were 76,877 completed cases, which comprised 76.2 percent of the total.

The average claim duration for disabilities related to pregnancy and childbirth was 9.6 weeks, compared with 10.2 weeks for non-pregnancy and 10.1 weeks for total completed cases. The maximum number of weeks allowable for any one period of disability is 26. Gross benefits for all cases completed during 2012 averaged \$4,273 per completed case, compared with \$4,233 in 2011. Average gross benefits per pregnancy and childbirth completed case were \$3,896 during 2012, somewhat lower than average gross benefits for other claim types combined of \$4,391 per completed case.

### **TDI Revenues, Benefits and Administrative Expenses**

Table 9 contains a summary of State Plan revenues, benefits and administrative expenses during 2011 and 2012. The State Plan for TDI is financed by a combination of worker and employer contributions which in 2012 totaled \$143.1 and \$212.4 million, respectively. During 2012, worker contributions declined by \$171.7 million compared with 2011 (-54.5%) due to a decrease in the worker contribution rate from 0.5 percent to 0.2 percent over the same period. The State Disability Fund also had \$29.6 million in other income, including interest income.

Total TDI State Plan benefits paid during 2012 were \$422.1 million, with benefit payments for disability during unemployment of \$18.8 million. TDI administrative expenses were \$37.4 million during 2012.

The average weekly benefit amount (AWBA) for all TDI eligible claims during 2012 was \$426, an increase of about one percent compared with 2011 (\$420). The AWBA is not available separately for pregnancy and other claims.

TABLE 1

FAMILY LEAVE INSURANCE – STATE PLAN  
BENEFITS AND AVERAGE DURATION FOR ELIGIBLE CLAIMS  
Calendar Year 2012

	<u>Claims for Bonding</u>			<u>Claims for Care of Seriously Ill Family Members</u>				<u>Total</u>	
	<u>Newborn</u>	<u>Adoption</u>	<u>Bonding</u>	<u>Child</u>	<u>Spouse</u>	<u>Other Family</u>	<u>Care</u>	<u>All Claims</u>	<u>Total</u>
Eligible Claims <sup>1</sup>	24,934	145	25,079	1,459	1,751	2,603	5,813	30,892	
Gross Benefits (Millions) <sup>2</sup>	\$66.2	\$0.4	\$66.7	\$2.6	\$3.3	\$4.9	\$10.8	\$77.5	
Estimated Average Benefit per Eligible Claim <sup>3,6</sup>	\$2,656	\$2,867	\$2,658	\$1,791	\$1,897	\$1,884	\$1,864	\$2,508	
Average Weekly Benefit Amount <sup>4</sup>	\$493	\$549	\$493	\$447	\$451	\$450	\$450	\$487	
Estimated Average Duration (Weeks) <sup>5,6</sup>	5.4	5.2	5.4	4.0	4.2	4.2	4.1	5.2	

<sup>1</sup>Eligible claims are defined as eligible original determinations, plus eligible redeterminations, less ineligible redeterminations.

<sup>2</sup>In addition to total State Plan gross benefits of \$77.5 million, approximately \$0.6 million in Family Leave During Unemployment benefits were paid during 2012.

<sup>3</sup>Estimated average benefit per eligible claim is calculated as gross benefits divided by eligible claims.

<sup>4</sup>Average weekly benefit amount is calculated as gross benefits divided by weeks compensated.

<sup>5</sup>Estimated average duration is calculated as weeks compensated divided by eligible claims.

<sup>6</sup>The estimated average benefit and estimated average duration data may reflect claimants who are just beginning a claim or who are intermittent claimants and therefore have not collected all of their potential weeks of benefits and may also include individuals who began their claims in the prior year. The figures differ from the more accurate actual data for completed cases in Table 3, but are available for more claim categories than the data on completed cases.

TABLE 1A

FAMILY LEAVE INSURANCE – STATE PLAN  
BENEFITS AND AVERAGE DURATION FOR ELIGIBLE CLAIMS  
Calendar Year 2011

	Claims for Bonding			Claims for Care of Seriously Ill Family Members				
	Newborn	Adoption	Total Bonding	Child	Spouse	Other Family	Total Care	Total All Claims
Eligible Claims <sup>1</sup>	24,413	208	24,621	1,493	1,931	2,656	6,080	30,701
Gross Benefits (Millions) <sup>2</sup>	\$63.2	\$0.6	\$63.8	\$2.5	\$3.5	\$4.7	\$10.7	\$74.5
Estimated Average Benefit per Eligible Claim <sup>3,6</sup>	\$2,590	\$2,700	\$2,591	\$1,644	\$1,815	\$1,782	\$1,758	\$2,426
Average Weekly Benefit Amount <sup>4</sup>	\$489	\$527	\$489	\$438	\$445	\$445	\$443	\$482
Estimated Average Duration (Weeks) <sup>5,6</sup>	5.3	5.1	5.3	3.8	4.1	4.0	4.0	5.0

<sup>1</sup>Eligible claims are defined as eligible original determinations, plus eligible redeterminations, less ineligible redeterminations.

<sup>2</sup>In addition to total State Plan gross benefits of \$74.5 million, approximately \$0.5 million in Family Leave During Unemployment benefits were paid during 2011.

<sup>3</sup>Estimated average benefit per eligible claim is calculated as gross benefits divided by eligible claims.

<sup>4</sup>Average weekly benefit amount is calculated as gross benefits divided by weeks compensated.

<sup>5</sup>Estimated average duration is calculated as weeks compensated divided by eligible claims.

<sup>6</sup>The estimated average benefit and estimated average duration data may reflect claimants who are just beginning a claim or who are intermittent claimants and therefore have not collected all of their potential weeks of benefits and may also include individuals who began their claims in the prior year. The figures differ from the more accurate actual data for completed cases in Table 3, but are available for more claim categories than the data on completed cases.

**TABLE 2**  
**FAMILY LEAVE INSURANCE – STATE PLAN**  
**AGE AND SEX OF TOTAL FAMILY LEAVE CLAIMANTS**  
**BY ELIGIBILITY STATUS**

Calendar Year 2012

	<u>Total</u>	<u>Female</u>	<u>Male</u>
<b>Eligible Claimants</b>			
Total with Information - Number	29,456	25,343	4,113
Percent*	100.0%	86.0%	14.0%
Total, Under 45 - Percent	88.7%	77.7%	11.0%
<i>Under 25</i>	4.7	4.3	0.5
<i>25 - 34</i>	56.0	50.0	6.0
<i>35 - 44</i>	28.0	23.4	4.5
Total, Over 45 - Percent	11.3%	8.3%	3.0%
<i>45 - 54</i>	6.3	4.5	1.7
<i>55- 64</i>	4.0	3.1	0.9
<i>Over 65</i>	1.0	0.7	0.3
<b>Ineligible Claimants</b>			
Total with Information - Number	3,464	2,705	759
Percent*	100.0%	78.1%	21.9%
Total, Under 45 - Percent	75.5%	59.8%	15.7%
<i>Under 25</i>	6.2	5.4	0.8
<i>25 - 34</i>	41.4	34.1	7.4
<i>35 - 44</i>	27.9	20.3	7.6
Total, Over 45 - Percent	24.5%	18.3%	6.2%
<i>45 - 54</i>	13.6	10.1	3.5
<i>55- 64</i>	8.7	6.8	1.9
<i>Over 65</i>	2.2	1.3	0.8

Note: Demographic data for eligible and ineligible claimants are based on original determinations and do not incorporate eligibility changes due to redeterminations. Totals do not match those in Table 1 due to differences in data processing procedures.

\*Percentages are computed by eligibility status for the total number of claimants with age and sex information. Percentages may not add to totals due to rounding.

**TABLE 2A**  
**FAMILY LEAVE INSURANCE – STATE PLAN**  
**AGE AND SEX OF BONDING FAMILY LEAVE CLAIMANTS**  
**BY ELIGIBILITY STATUS**  
**Calendar Year 2012**

	<u>Total</u>	<u>Female</u>	<u>Male</u>
<b>Eligible Claimants</b>			
Total with Information - Number	24,295	21,471	2,824
Percent*	100.0%	88.4%	11.6%
Total, Under 45 - Percents	99.0%	87.9%	11.1%
<i>Under 25</i>	5.5	5.0	0.5
<i>25 - 34</i>	65.0	58.5	6.5
<i>35 - 44</i>	28.5	24.4	4.0
Total, Over 45 - Percents	1.0%	0.5%	0.5%
<i>45 - 54</i>	1.0	0.4	0.5
<i>55- 64</i>	0.0	0.0	0.0
<i>Over 65</i>	0.0	0.0	0.0
<b>Ineligible Claimants</b>			
Total with Information - Number	2,048	1,673	375
Percent*	100.0%	81.7%	18.3%
Total, Under 45 - Percents	98.7%	81.2%	17.5%
<i>Under 25</i>	9.2	8.3	1.0
<i>25 - 34</i>	59.9	50.6	9.2
<i>35 - 44</i>	29.6	22.3	7.3
Total, Over 45 - Percents	1.3%	0.5%	0.8%
<i>45 - 54</i>	1.2	0.4	0.8
<i>55- 64</i>	0.0	0.0	0.0
<i>Over 65</i>	0.1	0.1	0.0

Note: Demographic data for eligible and ineligible claimants are based on original determinations and do not incorporate eligibility changes due to redeterminations. Totals do not match those in Table 1 due to differences in data processing procedures.

\*Percentages are computed by eligibility status for the total number of claimants with age and sex information. Percentages may not add to totals due to rounding.

**TABLE 2B**  
**FAMILY LEAVE INSURANCE – STATE PLAN**  
**AGE AND SEX OF FAMILY CARE FAMILY LEAVE CLAIMANTS**  
**BY ELIGIBILITY STATUS**

Calendar Year 2012

	<u>Total</u>	<u>Female</u>	<u>Male</u>
<b>Eligible Claimants</b>			
Total with Information - Number	5,161	3,872	1,289
Percent*	100.0%	75.0%	25.0%
Total, Under 45 – Percent	40.3%	29.6%	10.7%
<i>Under 25</i>	<i>1.1</i>	<i>0.9</i>	<i>0.3</i>
<i>25 - 34</i>	<i>13.6</i>	<i>10.0</i>	<i>3.5</i>
<i>35 - 44</i>	<i>25.6</i>	<i>18.7</i>	<i>6.9</i>
Total, Over 45 – Percent	59.7%	45.4%	14.3%
<i>45 - 54</i>	<i>31.3</i>	<i>23.9</i>	<i>7.4</i>
<i>55- 64</i>	<i>22.7</i>	<i>17.6</i>	<i>5.1</i>
<i>Over 65</i>	<i>5.8</i>	<i>4.0</i>	<i>1.8</i>
<b>Ineligible Claimants</b>			
Total with Information - Number	1,416	1,032	384
Percent*	100.0%	72.9%	27.1%
Total, Under 45 – Percent	42.0%	28.9%	13.1%
<i>Under 25</i>	<i>1.8</i>	<i>1.3</i>	<i>0.5</i>
<i>25 - 34</i>	<i>14.8</i>	<i>10.1</i>	<i>4.7</i>
<i>35 - 44</i>	<i>25.4</i>	<i>17.4</i>	<i>8.0</i>
Total, Over 45 – Percent	58.0%	44.0%	14.0%
<i>45 - 54</i>	<i>31.6</i>	<i>24.2</i>	<i>7.4</i>
<i>55- 64</i>	<i>21.2</i>	<i>16.7</i>	<i>4.5</i>
<i>Over 65</i>	<i>5.2</i>	<i>3.1</i>	<i>2.0</i>

Note: Demographic data for eligible and ineligible claimants are based on original determinations and do not incorporate eligibility changes due to redeterminations. Totals do not match those in Table 1 due to differences in data processing procedures.

\*Percentages are computed by eligibility status for the total number of claimants with age and sex information. Percentages may not add to totals due to rounding.

**TABLE 3**

FAMILY LEAVE INSURANCE – STATE PLAN  
SUMMARY OF DATA FOR COMPLETED CASES\*  
BY TYPE OF CLAIM  
Calendar Year 2012

<u>Type of Claim</u>	<u>Number of Cases</u>	<u>Percent of Cases</u>	<u>Average Duration (weeks)</u>	<u>Average Gross Benefits</u>
Care of a Family Member	5,890	19.0%	4.2	\$1,867
Total Bonding Claims	25,100	81.0	5.4	\$2,653
<i>Bonding Immediately Following a Pregnancy Claim for TDI</i>	12,887	41.6	5.5	\$2,587
<i>Bonding That Does Not Immediately Follow a Pregnancy Claim for TDI</i>	12,213	39.4	5.2	\$2,724
Total	30,990	100.0%	5.2	\$2,504

Calendar Year 2011 (REVISED)

<u>Type of Claim</u>	<u>Number of Cases</u>	<u>Percent of Cases</u>	<u>Average Duration (weeks)</u>	<u>Average Gross Benefits</u>
Care of a Family Member	5,874	19.4%	4.1	\$1,819
Total Bonding Claims	24,378	80.6	5.4	\$2,621
<i>Bonding Immediately Following a Pregnancy Claim for TDI</i>	11,952	39.5	5.5	\$2,559
<i>Bonding That Does Not Immediately Follow a Pregnancy Claim for TDI</i>	12,426	41.1	5.2	\$2,679
Total	30,252	100.0%	5.1	\$2,465

\*Completed cases include those claims formally closed in the FLI database in 2011 and 2012, as well as those with no payment activity for 90 days.

**TABLE 4**  
**FAMILY LEAVE INSURANCE – STATE PLAN**  
**EMPLOYER REQUIRED LEAVE RESULTING IN REDUCED BENEFIT DURATION\***  
**Calendar Years 2011 and 2012**

	<u>2011</u>	<u>2012</u>
Number of Claims Reduced	6,187	5,499
Total Number of Days Reduced	60,837	55,683
Average Number of Days Reduced	10	10

\*Includes all reported sick leave, vacation or other fully paid leave which resulted in reduced FLI benefit duration.

**TABLE 5**  
**FAMILY LEAVE INSURANCE – STATE PLAN**  
**REVENUES, BENEFITS AND EXPENSES**  
(Millions)  
Calendar Years 2011 and 2012

	<u>2011</u>	<u>2012</u>
<u>FLI Income</u>		
FLI Worker Contributions*	\$56.7	\$73.0
Other Income (including interest)	\$0.1	\$0.2
<b>Total FLI Income</b>	<b>\$56.8</b>	<b>\$73.2</b>
<u>FLI Benefits and Expenses</u>		
FLI State Plan Benefit Payments	\$74.7	\$76.8
Benefit Payments for Family Leave During Unemployment	\$0.5	\$0.6
FLI Administrative Expenses	\$6.5	\$6.2
<b>Total FLI Benefits and Expenses</b>	<b>\$81.7</b>	<b>\$83.6</b>

Note: Totals for benefit payments do not match those in Table 1 because the data are from different sources.

\*The FLI worker contribution rate for CY 2011 was 0.06 percent, and for CY 2012 the rate was increased to 0.08 percent.

**TABLE 6**  
**TEMPORARY DISABILITY INSURANCE – STATE PLAN**  
**NUMBER OF ELIGIBLE NEW CLAIMS**  
**BY TYPE OF CLAIM**  
**Calendar Year 2012**

<u>Type of Claim</u>	<u>Number of Claims</u>	<u>Percent of Claims</u>
Pregnancy and Complications of Childbirth	23,453	23.6%
All Other Claim Categories	76,007	76.4%
Total	99,460	100.0%

Calendar Year 2011 **(REVISED)**

<u>Type of Claim</u>	<u>Number of Claims</u>	<u>Percent of Claims</u>
Pregnancy and Complications of Childbirth	23,761	23.4%
All Other Claim Categories	77,830	76.6%
Total	101,591	100.0%

**TABLE 7**  
**TEMPORARY DISABILITY INSURANCE – STATE PLAN**  
**AGE AND SEX OF DISABILITY INSURANCE CLAIMANTS**  
**BY ELIGIBILITY STATUS**

Calendar Year 2012

	<u>Total</u>	<u>Female</u>	<u>Male</u>
<b>Eligible Claimants</b>			
Total with Information - Number	93,528	65,958	27,570
Percent*	100.0%	70.5%	29.5%
Total, Under 45	51.5%	40.9%	10.5%
Under 25	6.3	4.9	1.4
25 - 34	24.8	20.9	3.9
35 - 44	20.3	15.1	5.2
Total, Over 45	48.5%	29.6%	19.0%
45 – 54	22.8	14.6	8.2
55- 64	18.9	11.2	7.8
Over 65	6.8	3.8	3.0
<b>Ineligible Claimants</b>			
Total with Information - Number	20,080	13,320	6,760
Percent*	100.0%	66.3%	33.7%
Total, Under 45	55.1%	41.4%	13.7%
Under 25	10.5	7.7	2.7
25 - 34	24.9	20.1	4.8
35 - 44	19.7	13.5	6.1
Total, Over 45	44.9%	24.9%	20.0%
45 – 54	22.0	12.7	9.3
55- 64	16.8	9.0	7.8
Over 65	6.1	3.2	2.9

Note: Demographic data for eligible and ineligible claimants are based on original determinations and do not incorporate eligibility changes due to redeterminations.

\*Percentages are computed by eligibility status for the total number of claimants with age and sex information. Percentages may not add to totals due to rounding.

**TABLE 8**  
**TEMPORARY DISABILITY INSURANCE – STATE PLAN**  
**SUMMARY OF DATA FOR COMPLETED CASES\***  
**BY TYPE OF CLAIM**

Calendar Year 2012

<u>Type of Claim</u>	<u>Number of Cases</u>	<u>Percent of Cases</u>	<u>Average Duration (weeks)</u>	<u>Average Gross Benefits</u>
Pregnancy and Complications of Childbirth	24,011	23.8%	9.6	\$3,896
All Other Claim Categories	76,877	76.2%	10.2	\$4,391
Total	100,888	100.0%	10.1	\$4,273

Calendar Year 2011 (**REVISED**)

<u>Type of Claim</u>	<u>Number of Cases</u>	<u>Percent of Cases</u>	<u>Average Duration (weeks)</u>	<u>Average Gross Benefits</u>
Pregnancy and Complications of Childbirth	23,697	23.6%	9.7	\$3,908
All Other Claim Categories	76,924	76.4%	10.2	\$4,333
Total	100,621	100.0%	10.1	\$4,233

\*Completed cases include those claims formally closed in the TDI database in 2011 and 2012, as well as those with no payment activity for 90 days.

**TABLE 9**

TEMPORARY DISABILITY INSURANCE – STATE PLAN  
SUMMARY OF REVENUE, BENEFITS AND EXPENSES  
(Millions)

Calendar Years 2011 and 2012

	<u>2011</u>	<u>2012</u>
<u>TDI Income</u>		
TDI Worker Contributions*	\$314.8	\$143.1
TDI Employer Contributions	\$209.4	\$212.4
Other Income (including interest)	\$27.5	\$29.6
<b>Total TDI Income</b>	<b>\$551.7</b>	<b>\$385.1</b>
<u>TDI Benefits and Expenses</u>		
TDI State Plan Benefits	\$418.6	\$422.1
Benefit Payments for Disability During Unemployment	\$18.8	\$18.8
TDI Administrative Expenses	\$31.7	\$37.4
<b>Total TDI Benefits and Expenses</b>	<b>\$469.1</b>	<b>\$478.3</b>

\*The TDI worker contribution rate for CY 2011 was 0.5 percent, and for CY 2012 the rate was decreased to 0.2 percent.